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 FORM APPROVED  
 OMB NO. 0938-0391

 DEPARTMENT OF HEALTH AND HUMAN SERVICES  
 CENTERS FOR MEDICARE & MEDICAID SERVICES

H6/HL

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  165533	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED  C 04/27/2005
NAME OF PROVIDER OR SUPPLIER  HUMBOLDT CARE CENTER NORTH			STREET ADDRESS, CITY, STATE, ZIP CODE 1111 11TH AVE NORTH HUMBOLDT, IA 50548		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS- REFERENCED TO THE APPROPRIATE DEFICIENCY)		(X5) COMPLETION DATE
F 000	INITIAL COMMENTS  Complaint #4494 was not substantiated, however additional concerns were identified during the investigation. See Code of Federal Regulations (42 CFR) Part 483, Subpart B-C.  Correction Date _____	F 000	F000: All deficiencies were corrected by 5-15-05		
F 323 SS=B	483.25(h)(1) QUALITY OF CARE  The facility must ensure that the resident environment remains as free of accident hazards as is possible.  This REQUIREMENT is not met as evidenced by:  Based on observations and staff interviews the facility failed ensure that the resident environment remained as free of accident hazards as possible. The facility failed to store all oxygen tanks in an upright and secured manner, and failed to keep medication carts and medications store rooms locked at all times when not supervised. Concerns noted for two of three nurse's stations and three of four resident hallways. The facility reported a census of 86 residents.  Findings include:  1. Observation on 4/27/05 at 4:55 a.m. revealed the north medication room door stood in an open position, the medication cart in the north nurse's station sat unlocked and a ring of keys sat on the nurse's station. Observation revealed no staff in sight. The medication cart contained medications for twenty-two residents.	F 323	F323: Humboldt Care Center North will continue to ensure that the resident's environment remains as free of accident hazards as is possible.  1. All nursing staff were retrained regarding HCCN policies regarding locking the medication carts when not in direct view, as well as keeping the medication room doors locked at all times when not in use. Staff were retrained regarding the storage and handling of oxygen containers and equipment to maintain safety. This inservice was held on 5-6-05.  2. The Director of Nursing and/or designee will do daily rounds and random audits of the medication rooms, medication carts and oxygen storage.  3. Ongoing compliance with this regulation will be monitored by the facility Quality Assurance team monthly.		

HEALTH FACILITIES

JUN 06 2005

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Any deficiency statement ending with an asterisk (\*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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F 323	Continued From page 1  The open medication room contained the following medications in punch cards in open crates on the counter: a) 166 vials of Ipratropium Bromid 0.02%, inhalation solution b) 10 Propoxy-APAP c) 30 Lorazepam 0.5 mg (milligram) d) 8 Lorazepam 0.5 mg e) 10 Coumadin 2 mg f) one/half tablet of Augmentin 875 mg g) 14 Remeron 15 mg h) 1 Warfarin 2.5 mg i) 6 Prevacid 30 mg j) 12 Tylenol 325 mg k) 10 Tylenol 325 mg l) 23 Cephalexin 500 mg m) 1 Plavix 75 mg n) 17 Ibuprofen 200 mg o) 3 Warfarin 1 mg p) 18 Warfarin 2 mg q) 11 Potassium 10 millequivalent (mEq) r) 5 Ferrous Sulfate 325 mg s) 10 Risperdal 0.5 mg t) 18 Fluoxetine 20 mg u) 5 Aspirin 81 mg v) 5 Digoxin 0.25 mg w) 6 Lasix 40 mg x) 6 Metoprolol 25 mg y) 6 Theragram z) 5 Lescol XL aa) 14 whole tablets and 14 half tablets Fibercon 500 mg bb) 12 Augmentin 875 mg cc) 12 Loperamide 2 mg dd) 1 Cephalexin 250 mg ee) 44 Acetaminophen 325 mg ff) 23 half tablets of Remeron 15 mg gg) 52 Tylenol 650 mg	F 323			

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F 323	<p>Continued From page 2</p> <p>hh) 4 Warfarin 3 mg ii) 8 Zoloft 100 mg jj) 16 Dovan 160 mg kk) 15 Cardizem SR 120 mg ll) 16 Furosemide 40 mg mm) 16 Levothroid 100 mg nn) 4 Augmentin 875 mg oo) 4 Augmentin 875 mg pp) 15 Prednixonone 5 mg qq) 16 Pepcid 20 mg rr) 16 Famotidine 20 mg ss) 3 Aspirin 325 mg tt) 3 Ferrous Sulfate 325 mg uu) 18 Acetaminophen 325 mg vv) 5 rectal suppositories of Phenazoz 25 mg ww) 7 Warfarin 2 mg xx) 1 bottle of Tobra Dex eye drops</p> <p>The open medication room contained the following medications in unlocked cupboards:</p> <p>a) 1-80 grain tube of Triamcinolone Acetonide b) 2-2 ounce tubes of Bengay c) 1-3 ounce tube of Trolamon Salicylate pain relief cream d) 2-1 ounce tubes of Triple Antibiotic Ointment e) 1-1 ounce tube of Bacitracin f) 9 bottles of Guiatuss cough surup g) 4-10 ounce bottles of Docusate Sodium liquid stool softener h) 1 Advair disk i) 1-527 grain jar of Glycolax j) 300 Antacid tablets k) 1 bottle of Milk of Magnesia l) 7-1 pint bottles of Guiatuss cough surup m) 120 Calcium supplement tablets n) 1-14 ounce jar of Genfiber powder laxative o) 120 Fiber Con Lax tablets</p>	F 323			

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F 323	<p>Continued From page 3</p> <p>p) 100 Ferrous Sulfate 325 mg q) 300 Senna-Gen Senokot 8.6 mg r) 12 Aspirin 81 mg s) 300 Tylenol 325 mg t) 100 Docusate Sodium 100 mg u) 200 Aspirin 325 mg v) 1 bottle Kaopectate</p> <p>The open medication room contained the following chemicals in unlocked cupboards:</p> <p>a) 16 ounce bottle of Hydrogen Peroxide with a warning, "For external use only. Keep out of eyes. In case of accidental ingestion seek professional assistance or contact Poison Control Center immediately." b) 16 ounce bottle of Rubbing Alcohol with a warning, "Flammable. If swallowed get medical help or contact a Poison Control Center right away." c) 1 bottle of Selsun Blue medicated shampoo</p> <p>The open medication room contained the following medications in the unlocked refrigerator:</p> <p>a) 2 bottles of Tuberculin b) 5 bottles of Xalatan c) 2 bottles of Aplisol d) 86 Biscodyl Suppositories e) 30 Tylenol Suppositories</p> <p>When interviewed on 4/27/05 at 5:00 a.m. a registered nurse, Staff A stated he/she left her keys to the medication cart and the medication room laying on the open nurse's station counter when he/she left the area. Staff A also verified leaving the medication room door open and the medication cart unlocked. Staff A stated he/she</p>	F 323			

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F 323	Continued From page 4 walked to the end of the hallway and went into a resident's bedroom to give a resident medication and to take a resident's temperature.  2. Observation on 4/27/05 at 5:40 a.m. revealed an unlocked medication cart left in the southwest resident hallway. Observation revealed a licensed practical nurse, Staff B in a resident's bedroom with the privacy curtain pulled between the nurse and the bedroom door. The nurse failed to lock the medication cart when she left it unsupervised in the hallway.  3. Observation on 4/27/05 at 5:45 a.m. revealed an oxygen tank in an unlocked closet in the southwest resident hallway. The oxygen tank sat leaning in the corner of the closet. The facility failed to store this oxygen tank in an upright and secured manner.	F 323	F467: Humboldt Care Center North will continue to maintain adequate outside ventilation by means of windows, or mechanical ventilation, or a combination of both.  HCCN staff had identified that there were lingering odors on the southwest hallway and had ruled out ventilation inadequacy. HCCN had further identified that a specific resident, who lives on the southwest hallway, was having strong, lingering odors despite normal hygiene and housekeeping efforts, just prior to the time of this complaint survey.  The staff had developed and initiated a plan of action for this resident including: hydration program; ruled out UTI; enhanced daily housekeeping in the room; new wheelchair cushions and sling seat; new mattress; and whirlpool baths a minimum of three times weekly, as tolerated. As of 4/26/05 all of the above interventions had been initiated, the mattress had been ordered but had not yet arrived at the facility. The staff had also planned to request further testing and possible medical interventions from her physician at his next visit, planned for 4/27/05. The physician did see this resident on rounds on 4/27/05 after the surveyor exited the building and did order medication.		
F 467 SS=B	483.70(h)(2) PHYSICAL ENVIROMENT  The facility must have adequate outside ventilation by means of windows, or mechanical ventilation, or a combination of the two.  This REQUIREMENT is not met as evidenced by:  Based on observation and staff interviews the facility failed to controll odors for one of four resident hallways. The facility reported a census of 86 residents.  Findings include:  1. Observation on 4/26/05 at 2:06 p.m. revealed a strong urine odor in the southwest resident	F 467	The above interventions were effective and there has been no further lingering odors on that hallway.		

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F 467	<p>Continued From page 5 hallway.</p> <p>When interviewed on 4/26/05 at 2:08 p.m. the Director of Nursing and the Environmental Supervisor verified the urine odor and stated they had been "batting the urine odor for a couple of weeks".</p> <p>Observation on 4/26/05 at 6:15 p.m. revealed a strong urine odor in the southwest resident hallway.</p> <p>Observation on 4/27/05 at 4:45 a.m. revealed a strong urine odor in the southwest resident hallway.</p>	F 467	<p>Ongoing compliance with this regulation will be monitored by the facility Quality Assurance team monthly.</p> <p>The facility had identified and developed an effective plan of action prior to the time of this survey and this information was shared with the surveyor on 4/26/05 and 4/27/05.</p>		